

Department of Labor & Industries
Contractor Compliance Unit
PO Box 44152
Olympia WA 98504-4152



NOTIFICATION OF CONTRACT AWARD

FAX#: 360/902-4757
PHONE#: 360/902-4762

Date

Name of public agency awarding project

Contract number and/or name of project

UBI number of prime contractor

Date of award

Name and address of prime contractor

County in which work will be performed

Bid due date

Dollar amount of contract
\$

Description of the Project:

Telephone number

Name of person submitting this form